



# Bureau of TennCare IS Policy Manual

**REVISED--10/17/08**

<b>Policy No: BTC-Pol-Prv-200802-001</b>	
<b>Subject: MCC Provider Enrollment Files</b>	
<b>Approval: Encounter Data Policy Workgroup</b>	<b>Date: 04/04/2008</b>

**PURPOSE OF POLICY STATEMENT:** To clarify TennCare's position regarding MCC submission of monthly provider enrollment files.

## **POLICY:**

To ensure adequate provider networks as required by contract, MCCs must submit to TennCare provider enrollment files per MCC contract requirements. TennCare's provider reporting requirements are for all contracted providers plus any out-of-plan provider that has provided services to a TennCare recipient in the last 12-months. Only one provider file can be submitted per day per MCC.

For monthly submissions, these files must be submitted by each MCC no later than the 5<sup>th</sup> of each month. The MCCs will have 10 days prior to and up to the 5<sup>th</sup> of each month to submit their monthly provider enrollment file. When the 5<sup>th</sup> falls on a weekend day or a state-observed holiday, TennCare will extend the deadline to the next business day. This applies to all MCCs regardless of contract requirements for weekly or monthly provider enrollment files.

The MCCs will have two attempts to submit an acceptable monthly provider enrollment file. The second file must be submitted by the 5<sup>th</sup> and subsequently accepted to avoid assessment of liquidated damages.

## **Exceptions:**

None

**REFERENCE DOCUMENTS:**

HIPAA Implementation Guides

<http://www.wpc-edi.com>

TennCare HIPAA EDI Companion Guides

<http://www.state.tn.us/tenncare/HIPAA/EDI.htm>

**OFFICES OF PRIMARY RESPONSIBILITY:**

- TennCare IS Division—to ensure that provider enrollment files are submitted to TennCare and accepted
- Information Systems Management Contractor – to process provider enrollment files through the TCMIS system
- MCCs - to follow transaction requirements